# Form 940 for 2023: Employer's Annual Federal Unemployment (FUTA) Tax Return Department of the Treasury – Internal Revenue Service

850113

OMB No. 1	1545-0028
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Emplo (EIN)	over identification number 6 5 - 4 7 8 9 3 2 1		of Return all that apply.)
Name	(not your trade name)	a. A	Amended
Trade	name (if any)	<b>b.</b> S	Successor employer
			lo payments to employees in
Addre	Number Street Suite or room number	<b>− d.</b> F	inal: Business closed or
			stopped paying wages //ww.irs.gov/Form940 for
			ions and the latest information.
	City State ZIP code		
	Foreign country name     Foreign province/country     Foreign postal code		
Read t	ne separate instructions before you complete this form. Please type or print within the boxes.		
Part 1		ns be	fore completing Part 1.
1a 1b	If you had to pay state unemployment tax in one state only, enter the state abbreviation . If you had to pay state unemployment tax in more than one state, you are a multi-state	1a	
	employer	1b	Check here. Complete Schedule A (Form 940).
2	If you paid wages in a state that is subject to CREDIT REDUCTION	2	Check here. Complete Schedule A (Form 940).
Part 2	Determine your FUTA tax before adjustments. If any line does NOT apply, leave it	blank	· · ·
3	Total payments to all employees	3	•
4	Payments exempt from FUTA tax 4		
	Check all that apply:       4a       Fringe benefits       4c       Retirement/Pension       4e         4b       Group-term life insurance       4d       Dependent care       4e	o	ther
5	Total of payments made to each employee in excess of         \$7,000       5		
6	Subtotal (line 4 + line 5 = line 6)	6	915.73
7	Total taxable FUTA wages (line 3 – line 6 = line 7). See instructions	7	915.73
8	FUTA tax before adjustments (line 7 x 0.006 = line 8)	8	•
Part 3	Determine your adjustments. If any line does NOT apply, leave it blank.		
9	If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax multiply line 7 by 0.054 (line $7 \times 0.054$ = line 9). Go to line 12	9	•
10	If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax OR you paid ANY state unemployment tax late (after the due date for filing Form 940) complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet		915.73
44	If are distribution applies, onter the total from Schedule A (Form 940)	11	915.73
11 Part 4	If credit reduction applies, enter the total from Schedule A (Form 940)		
12	<b>Total FUTA tax after adjustments</b> (lines 8 + 9 + 10 + 11 = line 12)	12	•
13	FUTA tax deposited for the year, including any overpayment applied from a prior year .	13	•
14	Balance due. If line 12 is more than line 13, enter the excess on line 14.		
	<ul> <li>If line 14 is more than \$500, you must deposit your tax.</li> <li>If line 14 is \$500 or less, you may pay with this return. See instructions</li></ul>	14	•
15	Overpayment. If line 13 is more than line 12, enter the excess on line 15 and check a box below	15	
			xt return. Send a refund.

Part 50       Report your FUTA tax liability by quarter only if line 12 is more than \$500. If not, go to Part 6.         16       Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.         16a       16a       915.73         16b	Nam	e (not y	/our trade name)						Employe	er identifi	catio	on numbe	er (EIN)		סתכתכ
a quarter, leave the line blank.  16a 1st quarter (January 1 – March 31)	Par	t 5:	Report your F	UTA tax liability by q	uarter o	nly if line	e 12 is mo	ore than \$5	500. lf not, g	– o to Pa	art 6	<b>).</b>			
16b 2nd quarter (April 1 – June 30)       16b       •         16c 3rd quarter (July 1 – September 30)       16c       •         16d 4th quarter (October 1 – December 31)       16d       •         17 Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17) 17       •       Total must equal line 12.         Part 65       May we speak with your third-party designee?       Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.         Yes.       Designee's name and phone number	16				ty for ea	ich quarte	er; do NC	T enter the	e amount you	l depos	sited	l. If you	ı had	no lia	bility fo
16c       3rd quarter (July 1 – September 30)       16c       •         16d       4th quarter (October 1 – December 31)       16d       •         17       Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17) 17       •       Total must equal line 12.         28t6       May we speak with your third-party designee?       Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.         Yes.       Designee's name and phone number		16a	<b>1st quarter</b> (Jan	uary 1 – March 31) .			16	a	91	15.73	3				
16d       4th quarter (October 1 - December 31)       16d       .         17       Total tax liability for the year (lines 16a + 16c + 16c + 16c = line 17) 17       .       Total must equal line 12.         20rt 63       May we speak with your third-party designee?       Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.       .          Yes.       Designee's name and phone number		16b	2nd quarter (Ap	ril 1 – June 30)			16								
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Image: boost of a light period a definition of why to determine the matrice of the metric including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.         Sign your name here       Print your information of which preparer has any knowledge.         Date       25 / 03 / 2005         Best daytime phone       Print your it here is a daytime phone         Paid Preparer Use Only       Check if you are self-employed         Preparer's name       PTIN         Preparer's name       Date         25 / 03 / 2005       EIN         Address       Phone		<b>Y</b>	es. Designee	e's name and phone nu	mber										
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Sign your   name here     Print your   title here     Print your     Best daytime phone     Paid Preparer Use Only     Check if you are self-employed     Preparer's name   Preparer's name   Preparer's signature   bate   25 / 03 / 2005     Firm's name (or yours if self-employed)   Address     Phone		best ( fund	of my knowledge claimed as a cred	and belief, it is true, co dit was, or is to be, ded	orrect, an lucted fro	id complet om the pay	te, and th yments m	at no part of ade to empl	f any paymen	t made	to a	state u	nemp	loyme	the ent
name here       Print your         Date       25 / 03 / 2005         Best daytime phone       Best daytime phone         Paid Preparer Use Only       Check if you are self-employed         Preparer's name       PTIN         Preparer's name       PTIN         Preparer's name (or yours if self-employed)       Date         EIN       EIN         Address       Phone		Sian	Vour												
Date       25 / 03 / 2003         Paid Preparer Use Only       Check if you are self-employed         Preparer's name       PTIN         Preparer's signature       Date       25 / 03 / 2005         Firm's name (or yours if self-employed)       EIN       EIN         Address       Phone       EIN		-	-				F	rint your							
Date       25 / 03 / 2003         Paid Preparer Use Only       Check if you are self-employed         Preparer's name       PTIN         Preparer's signature       Date       25 / 03 / 2005         Firm's name (or yours if self-employed)       EIN       EIN         Address       Phone       EIN									Γ						
Preparer's name PTIN   Preparer's signature Date   Firm's name (or yours if self-employed) EIN   Address Phone			Date 25 /	03/ 2005			E	lest daytime	e phone						
Preparer's signature       Date       25 / 03 / 2005         Firm's name (or yours if self-employed)       EIN       Image: Compare the second seco		Paid	I Preparer Use	e Only						Chec	k if y	ou are :	self-ei	mploy	ed 🗌
signature     Date     25 / 03 / 2005       Firm's name (or yours if self-employed)     EIN       Address     Phone		Prepa	arer's name						PTIN						
if self-employed)     EIN       Address     Phone									Date	2	5 /	03/2	2005	5	
									EIN						
City State ZIP code		Addre	ess						Phor	ne					
		City				State	e		ZIP o	code					

# Form 940-V, Payment Voucher

#### Purpose of Form

Complete Form 940-V if you're making a payment with Form 940. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

### **Making Payments With Form 940**

To avoid a penalty, make your payment with your 2023 Form 940 **only if** your FUTA tax for the fourth quarter (plus any undeposited amounts from earlier quarters) is \$500 or less. If your total FUTA tax after adjustments (Form 940, line 12) is more than \$500, you must make deposits by electronic funds transfer. See *When Must You Deposit Your FUTA Tax?* in the Instructions for Form 940. Also see sections 11 and 14 of Pub. 15 for more information about deposits.



Use Form 940-V when making any payment with Form 940. However, if you pay an amount with Form 940 that should've been deposited, you may be subject to a penalty. See Deposit

Penalties in section 11 of Pub. 15.

#### **Specific Instructions**

**Box 1—Employer identification number (EIN).** If you don't have an EIN, you may apply for one online by visiting the IRS website at *www.irs.gov/EIN*. You may also apply for an EIN by faxing or mailing Form SS-4 to the IRS. If you haven't received your EIN by the due date of Form 940, write "Applied For" and the date you applied in this entry space.

**Box 2—Amount paid.** Enter the amount paid with Form 940.

**Box 3—Name and address.** Enter your name and address as shown on Form 940.

• Enclose your check or money order made payable to "United States Treasury." Be sure to enter your EIN, "Form 940," and "2023" on your check or money order. Don't send cash. Don't staple Form 940-V or your payment to Form 940 (or to each other).

• Detach Form 940-V and send it with your payment and Form 940 to the address provided in the Instructions for Form 940.

**Note:** You must also complete the entity information above Part 1 on Form 940.

# Detach Here and Mail With Your Payment and Form 940.

<b>940-V</b> Department of the Treasury Internal Revenue Service	C	<b>Payment Voucher</b> Don't staple or attach this voucher to your payment.					
<ol> <li>Enter your employer identification number (EIN).</li> </ol>			Enter the amount of your payment. Make your check or money order payable to "United States Treasury."	Dollars	i	Cents	
		3	Enter your business name (individual name if sole proprietor). Enter your address. Enter your city, state, and ZIP code; or your city, foreign country name,	, foreign province/cour	nty, and foreign	postal code.	

#### Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to carry out the Internal Revenue laws of the United States. We need it to figure and collect the right amount of tax. Chapter 23, Federal Unemployment Tax Act, of Subtitle C, Employment Taxes, of the Internal Revenue Code imposes a tax on employers with respect to employees. This form is used to determine the amount of the tax that you owe. Section 6011 requires you to provide the requested information if you are liable for FUTA tax under section 3301. Section 6109 requires you to provide your identification number. If you fail to provide this information in a timely manner or provide a false or fraudulent form, you may be subject to penalties.

You're not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books and records relating to a form or instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

Generally, tax returns and return information are confidential, as required by section 6103. However, section 6103 allows or requires the IRS to disclose or give the information shown on your tax return to others as described in the Code. For example, we may disclose your tax information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories to administer their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is:

Recordkeeping	9 hr., 19 min.
Learning about the law or the form	1 hr., 23 min.
Preparing, copying, assembling, and	
sending the form to the IRS	1 hr., 36 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 940 simpler, we would be happy to hear from you. You can send us comments from *www.irs.gov/FormComments*. Or you can send your comments to Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Don't send Form 940 to this address. Instead, see *Where Do You File?* in the Instructions for Form 940.